REGION FOUR STATEMENT OF SPECIAL INSPECTIONS

PROJECT NAME & AI	DDRESS					
PERMIT APPLICANT						
ADDRESS						
PHONE NO:						
CELL NO.						
E-MAIL						
FAX-NO						
STRUCTURAL ENGIN	IEER OF RECORD					
ADDRESS						
PHONE NO:						
CELL NO.						
E-MAIL						
FAX-NO						
ARCHITECT OF RECO	ORD					
ADDRESS						
PHONE NO:						
CELL NO.						
E-MAIL						
FAX-NO						
	RDP (PRINT)]			SEAL	
SPECIAL INSPECTOR (PRINT)						
SI SIGI		APPLICANT'S SIGNATURE & DATE				
RDP OF RECORD SIGNATURE & DATE			OWNER'S AUTHORIZATION (IF NOT APPLICANT)			
SER OF RECORD SIGNATURE & DATE				BUILDING OFFICIAL'S ACCEPTANCE & DATE		
This Statement of Special Inspections is submitted as a condition for permit issuance in accordance with the International Building Code (IBC) as stated in the Virginia Uniform Statewide Building Code (USBC). The Special Inspector shall keep records of all inspections, and shall furnish inspection and correction reports to the Building Official, RDP of Record, Owner and Contractor.						

ENCLOSURE (1) ADOPTED NOV 2008

NOTE: All fees and costs related to the performance of special professional services, I.E. Special Inspections,

shall be the responsibility of the owner.